

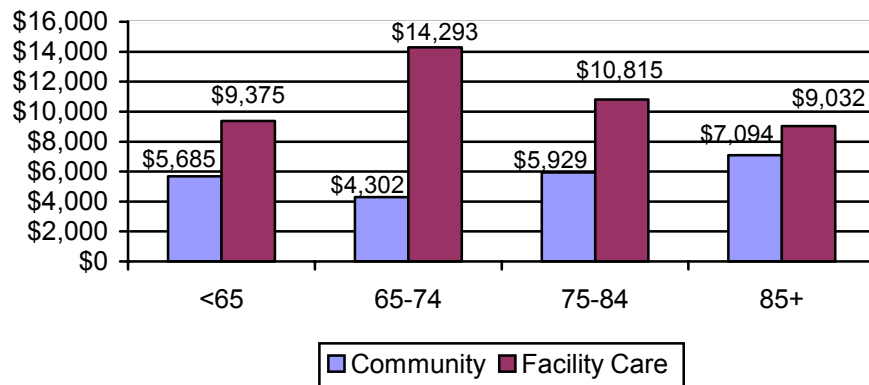
# Section 4

## Medicare Expenditures

### Medicare Expenditures, by Age

- Beneficiaries in facility care cost the Medicare program more per capita than those living in the community. Within the community, those beneficiaries aged 85 and older had the highest per capita expenditure.
- Beneficiaries aged 65 to 74 had the lowest per capita expenditures for community living (\$4,302) and the highest per capita expenditures for facility residents (\$14,293).
- Regardless of age or insurance type, Medicare expenditures were higher per capita for beneficiaries living in metropolitan areas than for those living in non-metropolitan areas.

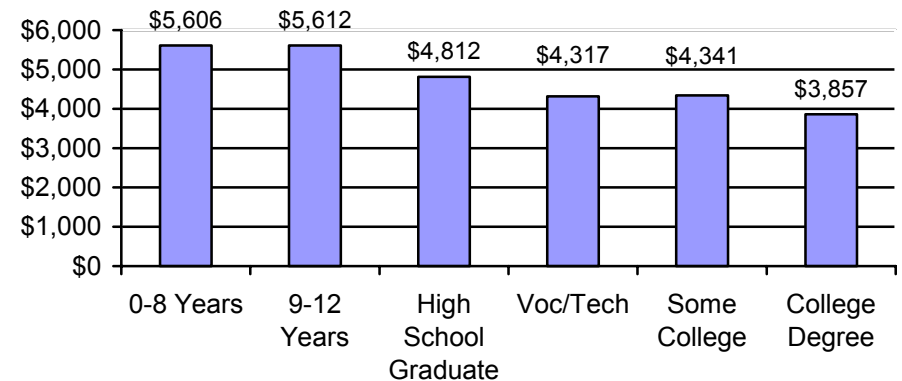
**Per Capita Medicare Expenditures, by Age and Residence**



### Medicare Expenditures, by Years of Schooling

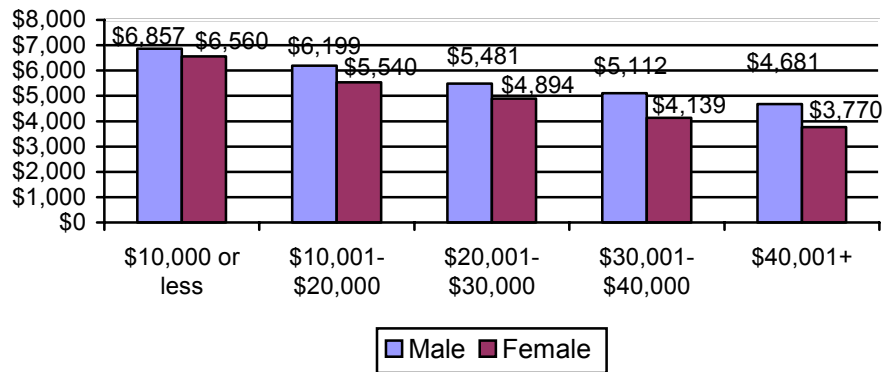
- Beneficiaries with more education generally cost the Medicare program less. Education, however, is strongly correlated with higher incomes and better health status.

**Per Capita Medicare Expenditures, by Years of Schooling**



## Medicare Expenditures, by Gender

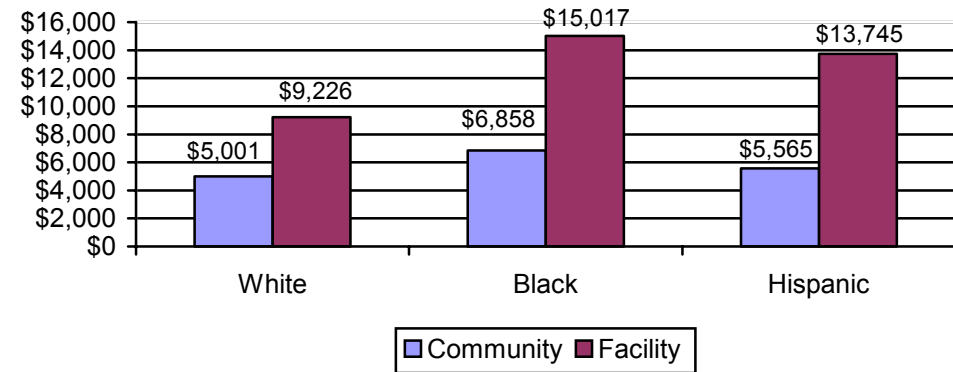
Per Capita Medicare Expenditures, By Gender and Income



- Medicare paid, on average, \$5,459 for male beneficiaries in the community and \$5,057 for female beneficiaries in the community. These figures were nearly doubled for beneficiaries in facility care.
- Male beneficiaries with supplemental private insurance had higher per capita expenditures than did female beneficiaries with private insurance. Female beneficiaries had higher expenditures for all other insurance types.
- Male beneficiaries had higher per capita expenditures at every income level.

## Medicare Expenditures, by Race and Ethnicity

Per Capita Medicare Expenditures, by Residence, Race and Ethnicity



- Black beneficiaries had the highest per capita Medicare expenditures compared to other racial or ethnic groups. Medicare expenditures for Black beneficiaries were at least 25 percent higher per capita than for any other racial or ethnic group.
- Per capita Medicare expenditures for Black beneficiaries in facility care were higher than any other racial or ethnic group in any other living arrangement.